# **Approved Forms**

# **ATP CTP Instructor Training Record**

Form BMA ATP CTP/INST-1 Revision Original 5/1/2017

### **ATP CTP Initial Instructor Training**

First Name	Phone Number	
Initial	Position/Aircraft	
Last Name		

### ACADEMIC TRAINING

Course Name	Date Completed as Observer	HRS	Date of Supervised Instruction 142.53(a)(1)	Training Instructor's Signature
Zoom Tng.		2		
GS day 1		8		
GS day 2		8		
GS day 3		8		
GS day 4		8		
FTD Day 5		5.5		

#### FSTD/FFS

Course Name	Date	Total	Instructor Signature	SAT/
	Completed	Hours	J	UNSAT
FSTD Observation MOD 201				
FSTD Instruction MOD 201				
FSTD Observation MOD 201				
FSTD Observation MOD 201				
FSTD Instruction MOD 201				
FSTD Instruction MOD 201				